MARYLAND TAX COURT

301 W. Preston Street, Suite 1513 Baltimore, Maryland 21201 410-767-4830 (Toll Free: 1-866-223-6075)

internet: http://taxcourt.maryland.gov

F	Petitioner	*		
	vs.	* *	CASE SSN	NO
	Respondent	*	0011.	(Income Tax Appeals only)
	PETITION (OF AF	PPEAL	
I. This is an ap	peal from: (please check one)	2.	Type of Tax	x Being Appealed:
	An Assessment			Income/Withholding Tax
	An Allowance/Disallowance of a			Sales/Use Tax
	Claim for Refund of Tax Denial of Claim for Property Tax Credit			Transfer/Recordation Tax
	Other:			Other:
	,			
				x year(s) involved:
The date of the date of the datePlease set	he assessment notice or action complained of out the reason(s) you believe that the action eviewed by the Court should also be provided.	was n taken Contin	against you	u was illegal or erroneous. Any addition
The date of the date o	he assessment notice or action complained of out the reason(s) you believe that the action eviewed by the Court should also be provided.	was n taken Contin	against you	u was illegal or erroneous. Any addition ack if necessary.
5. The date of the first of the	he assessment notice or action complained of out the reason(s) you believe that the action eviewed by the Court should also be provided.	was n taken Contin	against you	u was illegal or erroneous. Any addition ack if necessary.
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PLEASE NOTE:

If the petitioner is an individual this petition should be signed by said petitioner or an attorney. If petitioner is a partnership, it should be signed by an attorney for the partnership or by any partner. If petitioner is a corporation, it should be signed by the corporation's attorney or by any officer of the corporation. The person signing should designate the capacity in which he/she signs. In any instance, the attorney must be duly admitted to practice before the Court of Appeals.

For the Hearing Impaired: MRS 1-800-735-2258